

CHECK ONE:

THE COMMONWEALTH OF MASSACHUSETTS EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY

Department of Criminal Justice Information Services

200 Arlington Street, Suite 2200, Chelsea, MA 02150 TEL: 617-660-4600 | TTY: 617-660-4606 | mass.gov/cjis

FTN: _	PD USE ONLY
LIC#: _	

Submit this form and direct any questions to your local police department

MASSACHUSETTS RESIDENT LTC/FID/MACHINE GUN APPLICATION

FOR NEW/RENEWAL OF A FIREARMS IDENTIFICATION CARD OR LICENSE TO CARRY FIREARMS OR LICENSE TO POSSES A MACHINE GUN (M.G.L c. 140, §§ 129B, 131)

ent License to Carry/FID Number:			a rada ^{Sa}
TION TYPE (Check Only One):			
n Card - Restricted (self-defense spra	iy)		
n Card			
Machine Gun			
nly the Colonel of the State Police car	n issue a club license)		
TORE, FRINT OR TIPE ALL	REGUESTED INFORMA	ATION.	
First Name	Middle	Name	Suffix
City	State	Zip Code	Telephone Number
City	State	Zip Code	Telephone Number
Place of Birth (City, State, Countr	у)		
Mother's Maiden Name	Father's First Name	Father's La	st Name
Build Complexion	Hair Color	E	ye Color
Build Complexion	Hair Color Social Security Number (ye Color rivers License Number
Build Complexion			
	r a first firearms identification card or tificate must be attached, unless exerd. FION TYPE (Check Only One): In Card - Restricted (self-defense sprain Card Machine Gun Inly the Colonel of the State Police car TURE, PRINT OR TYPE ALL First Name City Place of Birth (City, State, Country)	r a first firearms identification card or license to carry firearms, a coptificate must be attached, unless exempt by statute. If this is a renewd. FION TYPE (Check Only One): In Card - Restricted (self-defense spray) In Card Machine Gun Inly the Colonel of the State Police can issue a club license) TURE, PRINT OR TYPE ALL REQUESTED INFORM. First Name Middle City State Place of Birth (City, State, Country)	r a first firearms identification card or license to carry firearms, a copy of the Firea tificate must be attached, unless exempt by statute. If this is a renewal application d. FION TYPE (Check Only One): In Card - Restricted (self-defense spray) In Card Machine Gun Inly the Colonel of the State Police can issue a club license) TURE, PRINT OR TYPE ALL REQUESTED INFORMATION: First Name Middle Name City State Zip Code Place of Birth (City, State, Country)

ANSWER THE FOLLOWING QUESTIONS COMPLETELY AND ACCURATELY:

1.	Are you a citizen of the United States?		☐ YES	
	If lawful permanent resident alien, give green card number and resident date	Green Card Number Res	sident Since (date	e)
	If naturalized, give date, place and naturalization number	Date Place Nat	turalization No.	
2.	Have you ever renounced your U.S. citizens	ship?	□ YES	□ NO
3. 4.		to apply for a LTC, 18 to apply for a FID card, or 14 to 17 with ermission to apply for a FID card or FID card – Restricted).		
5.	Have you ever been arrested or appeared in	n court as a defendant for any criminal offense?	□ YES	
6.	Are you the subject of any pending criminal	charges?	□ YES	□ NC
7.	Have you ever been convicted of a felony?		□ YES	
8.	Have you ever been convicted of the unlawf as defined in M.G.L. c. 94C, § 1?	ful use, possession, or sale of controlled substances	□ YES	□ NC
9.	Have you ever been convicted of a violent c	rime or a crime of domestic violence?	☐ YES	□ NC
10.	Have you ever been convicted as an adult of in any state or federal jurisdiction?	or adjudicated a youthful offender or delinquent child	□ YES	□ NO
11.	Are you now, or have you ever been the sub or a similar order issued by another jurisdict	oject of a restraining order issued pursuant to M.G.L. c. 209A ion?	A, □ YES	□ NC
12.	Are you currently the subject of any outstand	ding arrest warrant in any state or federal jurisdiction?	□ YES	□ NC
13.	Have you ever been committed to any hospi	ital or institution for mental illness, or alcohol or substance ab	ouse? □ YES	□ NC
13.	Has any firearms license issued under the la or denied?	aws of any state or territory ever been suspended, revoked,	□ YES	□ NO
14.	Have you been discharged from the armed f	forces of the United States under dishonorable conditions?	□ YES	□ NO
15.	Have you been the subject of an order of the	probate court appointing a guardian or conservator?	□ YES	□ NC
f yo	ou answered "YES" to any of the q umstances and location; use a se	uestions 2-15, give details which must includ parate sheet of paper if necessary.	e dates,	
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LTC-FID Application – Revised May 2015

YES", provide name and explain:			
her than Massachusetts, in what state(s), ter	ritory(ies), or jurisdiction(s) have you lived?		□ NONE
ve you ever held a firearms license in any of	her state, territory or jurisdiction?		☐ YES ☐ NO
YES", when, where, and license number?			
st the name and addresses of two references	(as required by your licensing authority)		
Last Name	First Name		· ·
Address	City/Town	State	Zip
Last Name	First Name		
Address	O't /T		
ason(s) for requesting the issuance of a care	City/Town d or license:	State	Zip
ason(s) for requesting the issuance of a card	d or license: Sporting Employment		
ason(s) for requesting the issuance of a care Unrestricted □ Target & Hunting □	d or license: Sporting Employment		
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ason(s) for requesting the issuance of a care Unrestricted Target & Hunting See lines below to indicate the reason(s) you are re ARNING* Any person who knowingly files an a	pplication containing false information shall be not less than 6 months nor more than 2 years 8(8), 131(h)).	aper if necessary punished by a fin in a house of corr	e of not less that ection, or by botalse answer(s)
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LTC-FID Application – Revised May 2015

Massachusetts License to Carry (LTC)/Firearms Identification Card (FID) Affidavit

License Holder Name: Current LTC or FID card Number: Please select one: A.	Complete this	form <u>only</u> if you ar	e <u>renewing</u>	g your firear	ms license.		
Please select one: A.	License Holder	Name:					
A. (No firearm(s) lost or stolen since previous issuance of LTC or FID card) 1. I am renewing a Massachusetts firearms identification (FID) card or license to carry (LTC) firearms. 2. I have not lost one or more firearms or had any firearms stolen since the renewal or issuance of my last FID card or LTC. OR 8. (Firearm(s) reported lost or stolen since previous issuance of LTC or FID card) 1. I am renewing a Massachusetts firearms identification (FID) card or license to carry (LTC) firearms. 2. I have lost one or more firearms or have reported stolen one or more firearms since the renewal or issuance of my last FID card or LTC. List all lost or stolen firearms below; use additional sheets as necessary. Ost or Date Reported Reported to Type Make Model Serial Number Case Number tolen Lost or Stolen (Police Dept.) The above information is true and accurate to the best of my knowledge and belief. SIGNED UNDER THE PENALTIES OF PERJURY:	Current LTC or	FID card Number:					
1. I am renewing a Massachusetts firearms identification (FID) card or license to carry (LTC) firearms. 2. I have not lost one or more firearms or had any firearms stolen since the renewal or issuance of my last FID card or LTC. OR B.	Please select o	ne:					
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Date Reported Reported to (Police Dept.) Type Make Model Serial Number Case Number Case Number The above information is true and accurate to the best of my knowledge and belief. SIGNED UNDER THE PENALTIES OF PERJURY:	the renewal or	issuance of my las	st FID card o	or LTC.			earms since
SIGNED UNDER THE PENALTIES OF PERJURY:	Date Reported	Reported to					Case Number
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SIGNED UNDER THE PENALTIES OF PERJURY:							
	The above info	rmation is true and	d accurate t	to the best o	of my knowled	dge and belief.	
Signature: Date:	SIGNED UNDER	R THE PENALTIES O	F PERJURY:				
	Signature:				Date:		